

Nearly one hundred case histories are given. These are unusually full and detailed, and build up vivid pictures of disturbed children and their environments. Much can be learnt from these case reports alone.

The theoretical chapters at the beginning and also the final chapters of discussion are most valuable. Dr. Soddy acknowledges the debt he owes to the work of Freud but he is not rigidly bound to the Freudian psychoanalytic school, and has a much wider and more tolerant outlook.

This book can be recommended to all those interested in the emotional problems of children, be they psychiatrists, paediatricians or general practitioners. Some knowledge of dynamic psychology is advisable, however, if full value is to be gained from this well written text-book.

M. E. L.

ACTIVE ALERTED POSTURE. By W. E. Tucker, C.V.O., T.D., M.A., M.B., B.Ch., F.R.C.S. (Pp. viii + 64; figs. 24. 10s. 6d.) Edinburgh and London: E. & S. Livingstone, 1960.

THIS monograph of 61 pages is written in a manner reminiscent of the popular press, and not that of a Medical Textbook. The reader will reach page 37 before he will find a definition of the subject matter. He will then learn that "hundreds of millions of humans" adopt a malign posture called Inactive Slumping Posture. This is the cause of most of human ailments from headaches to bunions. It can be countered by the adoption of Active Alerted Posture and this is the theme of the monograph.

Reasonable physiological descriptions are followed by very unreasonable pathological statements, such as, "From experience gained in the examination of thousands of cases, the impression is that in the early stages of postural strain something accumulates in the tissues, resulting in pain and tenderness." Anecdotes are interspersed in the text, but often without point.

The Bunyanesque use of the capital letter is continued throughout and Active Alerted Posture overcomes Inactive Slumping Posture in the long run.

The work was written for General Practitioners and Physiotherapists, but in its present form, its market will be very restricted.

The publication is by E. & S. Livingstone Ltd.—presumably from their Sunday Newspaper section.

R. I. W.

DISC LESIONS AND OTHER INTERVERTEBRAL DERANGEMENTS. By E. J. Crisp, M.D.(Cantab.), D.Phys.Med.(Lond.). (Pp. viii + 158; figs. 48. 15s.) Edinburgh and London: E. & S. Livingstone, 1960.

THIS is yet another publication on the subject of Disc Lesions. It is a valuable contribution as it sets out to show that there are many forms of treatment for the various conditions described in the book. Emphasis is laid on the value of rest (this lesson seems to be one which most General Practitioners are loathe to learn), and the author strongly opposes the use of the universal term 'Slipped Disc.' He opposes, even more strongly, the belief that all 'Slipped Discs' can be put back by manipulation.

While most of the beliefs of the author can be upheld, one or two points must be open to discussion. Surely it is not possible to apply a plaster-of-Paris jacket so tightly that it acts 'like a Thomas splint' with its distracting force on the pelvis at one end and on the ribs at the other? Traction cannot reduce a Disc Prolapse, and must act as means of aiding immobilisation. Injection into a zygoapophyseal joint may be possible, but palpation of such a joint must be a clinical feat achieved by very few.

Apart from these few unacceptable details, the book was impressive. It is well worthwhile reading, and every General Practitioner will find valuable information in it.

It can be recommended to all members of the profession who have to deal with Disc Lesions either professionally or personally.

R. I. W.